

Inspection Report

13 January 2022



City Way Day Centre

Type of service: Day Care Setting
Address: 2a Boyne Court, Sandy Row, Belfast, BT12 5BL
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Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

Organisation/Registered Provider: Belfast Health and Social Care Trust (BHSCT) Responsible Individual: Dr Catherine Jack	Registered Manager: Miss Jill Cowan Date registered: 19 January 2017
Person in charge at the time of inspection: Miss Jill Cowan	
Brief description of the accommodation/how the service operates: City Way Day Centre is a day care setting that is registered to provide care and therapeutic activities for up to 50 service users for older people and younger physically disabled adults. The day centre is open Monday to Friday and is managed by the BHSCT.	

2.0 Inspection summary

An unannounced inspection was undertaken on 13 January 2022 between 10.00 a.m. and 1.30 p.m. by the care inspector.

This inspection focused on recruitment, Northern Ireland Social Care Council (NISCC) and Nursing and Midwifery Council (NMC) registrations, adult safeguarding, notifications, complaints, whistleblowing, Deprivation of Liberty Safeguards (DoLS) including money and valuables, restrictive practice, dysphagia, monthly quality monitoring and Covid-19 guidance.

No areas for improvement were identified during this inspection.

There were good governance and management oversight systems in place. Good practice was also found in relation to the system in place of disseminating Covid-19 related information to staff.

The findings of this report will provide the day care setting with the necessary information to assist them to fulfil their responsibilities, enhance practice and service users' experience.

3.0 How we inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how they were performing at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the service provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

Prior to inspection we reviewed the information held by RQIA about this day care setting. This included the previous inspection report and any written and verbal communication received since the previous care inspection.

The inspection focused on:

- contacting the service users, their relatives, HSCT representatives and staff to find out their views on the service.
- reviewing a range of relevant documents, policies and procedures relating to the day care setting's governance and management arrangements.

Information was provided to service users, relatives, staff and other stakeholders to request feedback on the quality of service provided. This included questionnaires for service users/relatives. An electronic survey was provided to enable staff to feedback to the RQIA.

4.0 What people told us about the service

We spoke with 11 service users and two staff. Following the inspection we made telephone communication with one relative and one BHSCT community representative.

In addition we received questionnaires from service users/relatives which indicated that they were generally happy with the service provided by the agency. No electronic survey feedback was received from staff or Trust representatives before the issue of the report.

Comments received during inspection process-

Service users' comments:

- "The staff are very good to me."
- "I love it here."
- "You couldn't get any better staff."
- "The staff always wears masks and gloves."
- "The whole place is friendly."
- "It's nice to get food made for you."
- "I come one day a week now because of Covid."
- "I would tell staff if I had any concerns."
- "I am very satisfied about everything."
- "I love coming to the centre on the days I have been allocated."
- "Staff are excellent and nothing is any trouble to them."

Staff comments:

- “I love my job.”
- “I got an induction.”
- “We did DoLS and Mental Capacity Act (MCA) training.”
- “Management would listen to concerns.”
- “We get supervision and Staff Development Review (SDR).”
- “The manager is approachable.”
- “Communication is key in the team.”

BHSCT community representatives’ comments:

- “Staff do not sit on anything that might be wrong. They report it immediately.”
- “The building is good for service user’s needs.”
- “There is good joined up working with community staff.”
- “Service users have not highlighted any concerns.”

5.0 The inspection**5.1 What has this service done to meet any areas for improvement identified at or since last inspection?**

The last inspection to City Way Day Centre was undertaken on 17 October 2019 by a care inspector; no areas for improvement were identified.

5.2 Inspection findings**5.2.1 Are there systems in place for identifying and addressing risks?**

The day care setting’s provision for the welfare, care and protection of service users was reviewed. The organisation’s policy and procedures reflected information contained within the Department of Health’s (DoH) regional policy ‘Adult Safeguarding Prevention and Protection in Partnership’ July 2015 and clearly outlined the procedure for staff in reporting concerns. The organisation had an identified Adult Safeguarding Champion (ASC).

Discussions with the Manager established that they were knowledgeable in matters relating to adult safeguarding, the role of the ASC and the process for reporting adult safeguarding concerns.

It was noted that staff are required to complete classroom based adult safeguarding training during their induction programme and two yearly updates thereafter. Day care setting support staff had completed adult safeguarding training.

Staff indicated that they had a clear understanding of their responsibility in identifying and reporting any actual or suspected incidences of abuse. They could describe their role in relation to reporting poor practice and their understanding of the day care setting's policy and procedure with regard to whistleblowing.

The day care setting had a system for retaining a record of referrals made to the BHSCT in relation to adult safeguarding. Records reviewed and discussions with the Manager indicated that a number of adult safeguarding referrals had been made since the last inspection.

Service users who spoke to us stated they had no concerns regarding their safety; they described how they could speak to staff if they had any concerns about safety or the care being provided.

There were systems in place to ensure that notifiable events were investigated and reported to RQIA or other relevant bodies appropriately. It was noted that incidents had been managed in accordance with the day care setting's policy and procedures.

All staff had completed DoLS training appropriate to their job roles; records reviewed clarified training. Discussion with staff clarified their knowledge of the subject. Discussion with the Manager confirmed that no service users met the criteria to have a DoLS practice in place.

The Manager told us that the day care setting did not manage service users' monies.

Staff demonstrated that they had an understanding that service users who lack capacity to make decisions about aspects of their care and treatment have rights as outlined in the Mental Capacity Act.

There was a good system in place in relation to the dissemination of information relating to Covid-19 and infection prevention and control practices.

5.2.2 Is there a system in place for identifying service users Dysphagia needs in partnership with the Speech and Language Therapist (SALT)?

The Manager identified a number of service users who required assistance with eating and drinking due to having swallowing difficulties; some of whom required their food and drinks to be of a specific consistency. Review of the records identified that the risk assessments were consistently reflected in the care plans.

New standards for thickening food and fluids were introduced in August 2018. This was called the International Dysphagia Diet Standardisation Initiative (IDDSI). It was established and positive to note that all staff had completed training in Dysphagia.

5.2.3 Are their robust systems in place for staff recruitment?

The review of the agency's staff recruitment records confirmed that two new recruitments were managed in accordance with the regulations and minimum standards, before staff members commence employment and engage with service users. Records viewed evidenced that criminal record checks (Access NI) had been completed for staff.

A review of the records confirmed that all staff provided are appropriately registered with NISCC and NMC. Information regarding registration details and renewal dates are monitored by the Manager; this system was reviewed and found to be in compliance with Regulations and Standards. Staff spoken with confirmed that they were aware of their responsibilities to keep their registrations up to date.

The Manager told us that the day care setting does not use volunteers or voluntary workers.

5.2.4 Are there robust governance processes in place?

There were monitoring arrangements in place in compliance with Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007. Reports relating to the day care setting's monthly monitoring were reviewed. The process included engagement with service users, service users' relatives, staff and BHSC representatives. The reports included details of the review of service user care records; accident/incidents; safeguarding matters; complaints; staff recruitment and training, and staffing arrangements. It was noted that an action plan was generated to address any identified areas for improvement and these were followed up on subsequent months, to ensure that identified areas had been actioned.

We noted the following comment on the day care settings quality monitoring report from a service user's relative:

'Feels that his XXXX needs are being met by the centre. Feels the quality of care is really good and is thankful for his XXXX attendance at the day centre.'

'Carer informed me that XXXX XXXX found it difficult to settling into City Way when XXXX first commenced. XXXX praised staff for their patience and ability to help her XXXX settle in.'

There is a process for recording complaints in accordance with the day care setting's policy and procedures. It was noted that no complaint were received since the last inspection.

It was established during discussions with the Manager that the day care setting had not been involved in any Serious Adverse Incidents (SAIs) Significant Event Analyses (SEAs) or Early Alert's (EAs).

6.0 Conclusion

Based on the inspection findings and discussions held RQIA was satisfied that this service was providing safe and effective care in a caring and compassionate manner; and that the service was well led by the Manager/management team

7.0 Quality Improvement Plan/Areas for Improvement

	Regulations	Standards
Total number of Areas for Improvement	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Miss Jill Cowan, Registered Manager, as part of the inspection process and can be found in the main body of the report.



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